

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IC NO.	DATE
FREE DETERMINATION	LBV/IA	101	02-16-01
D.O.D.E. CLASSIFIER		379	
FORMALITY REVIEW	1-S	866	03-09-01
RESPONSE FORMALITY REVIEW	SS	573	05-30-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)..	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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20	✓
21	✓
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23	✓
24	✓
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27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	N
34	N
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim		Date
Final Original		
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Claim	Date
Final	
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If more than 150 claims or 10 actions
staple additional sheet here

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